



SECTION: Nutrition Services 710
SUBJECT: BREASTFEEDING: Definition, Promotion and Support Standards
DATE: March 8, 2016 (*revised*)

POLICY: Local WIC programs shall provide breastfeeding promotion, education and support to participants.

PURPOSE: To promote breastfeeding as the biological norm for infant feeding and to provide breastfeeding support to mothers and infants to extend breastfeeding exclusivity and duration.

RELEVANT REGULATIONS: 7 CFR §246.11 (c)(5)—Monitor local program activities
7 CFR §246.11 (c)(7)(i)-(iv)—Breastfeeding promotion and support standards
7 CFR §246.11 (e)(1) – Encouragement of breastfeeding
7 CFR §246.2 – Breastfeeding definition
All States Memorandum 96-06—Non-birth Mothers Certified as Breastfeeding Women

OREGON WIC PPM REFERENCES: ♦435—Staffing Recommendations
♦460—Program Incentive Items
♦712—Breastfeeding: Breast Pump Ordering, Distribution and Tracking Guidelines
♦713—Breastfeeding: Use of Supplemental Formula

DEFINITIONS:

Breastfeeding The practice of feeding a mother’s breast milk to her infant(s) on the average of at least once per day.

Breastfeeding Woman The category “breastfeeding woman” refers to women up to one year postpartum who are breastfeeding an infant, including

- Women who are providing any amount of breast milk to their infant(s) via breastfeeding (exclusively or partially).
- Women who are providing any amount of breast milk to their infant(s) by expressing the breast milk by hand or pump and feeding the expressed breast milk to the infant.
- Women who are providing any amount of breast milk to infants to whom they did not give birth (see definition below).

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<i>(Breastfeeding Woman)</i>	<p>A “breastfeeding woman” fits into one of the following three categories:</p> <p>Fully breastfeeding woman A breastfeeding woman who is up to one year postpartum, whose infant does not receive formula from WIC.</p> <p>Mostly breastfeeding woman A breastfeeding woman who is up to one year postpartum, whose infant receives infant formula from WIC up to the maximum provided for a mostly breastfeeding infant.</p> <p>Some breastfeeding woman A breastfeeding woman who is up to one year postpartum, whose infant receives more than the maximum amount of infant formula from WIC provided for a mostly breastfeeding infant, but less than the amount provided for a non-breastfeeding infant.</p>
<i>Non-birth Breastfeeding Woman</i>	<p>A woman who breastfeeds an infant to whom she did not give birth and for whom she <i>has</i> legal responsibility. Examples include foster mothers, adoptive mothers, and female partners in the same household. A non-birth breastfeeding woman may receive WIC services if she meets eligibility criteria and the infant receiving her breast milk is a WIC participant.</p>
<i>Wet Nurse</i>	<p>A woman who breastfeeds an infant to whom she did not give birth and for whom she does <i>not</i> have legal responsibility (custody). A wet nurse may receive WIC services if she is not being compensated for providing her breast milk, she meets WIC eligibility criteria, and the infant receiving her breast milk is a WIC participant.</p>
<i>Category Distinction</i>	<p>The category “breastfeeding woman” does NOT include women who are providing breast milk to infants <i>only</i> by donating their breast milk to a milk bank or other source.</p>

APPENDIX:	Appendix A	710.6	Local Agency Breastfeeding Coordinator Roles And Responsibilities
	Appendix B	710.8	Breastfeeding Support – Special Situations

PROCEDURE:

Promotion of Breastfeeding

- 1.0 Oregon WIC staff shall promote breastfeeding as the biological norm for infant feeding.
 - 1.1 Provide breastfeeding promotion and support information at the prenatal certification visit, and throughout the prenatal and postpartum periods.
 - 1.2 All pregnant participants should be encouraged to breastfeed unless contraindicated for health reasons.

Local Agency Staffing

- 2.0 Each local program shall designate a staff person to serve as the Breastfeeding Coordinator to provide leadership to the local WIC agency on breastfeeding promotion, education and support matters. See Appendix A for a list of the specific qualifications, roles and responsibilities of the local agency Breastfeeding Coordinator. See also ♦435—Staffing Recommendations.

Staff Training

- 3.0 Federal regulations require that the state WIC program provide training on the promotion and management of breastfeeding to staff at local agencies who then provide information and assistance to participants.
 - 3.1 The local agency Breastfeeding Coordinator helps train staff in the provision of breastfeeding support services.
 - 3.2 Task-appropriate breastfeeding training shall be included in the orientation programs for all new WIC staff.
 - 3.3 The local agency Breastfeeding Coordinator serves as a mentor for new and existing staff.
 - 3.4 Local agency training supervisors shall use state provided training modules and materials to train local agency staff.

Clinic Environment

- 4.0 Establish local program policies that promote a breastfeeding-friendly clinic environment.
 - 4.1 Encourage staff to communicate a positive attitude toward breastfeeding.
 - 4.2 Use positive breastfeeding messages and images in educational and outreach materials and displays.
 - 4.3 Ensure that infant formula, bottles, and related materials are out of the sight of participants and the public.
 - 4.4 Do not use or purchase items that market specific brand name products, such as bottles or handouts with a formula company logo. Refuse samples from formula representatives for use by local agency staff. See also ♦460—Program Incentive Items.

- 4.5 Encourage and support local agency staff to breastfeed.
- 4.6 Support breastfeeding in clinics and provide private space for staff and participants to breastfeed and/or express breast milk.

Special Situations

- 5.0 Occasionally situations arise when careful attention is needed for determining whether a breastfeeding woman meets eligibility requirements for WIC. Such special cases include adoption, foster care, or households headed by two females. See Appendix B for specific details on how to enroll these special cases on WIC. For situations not addressed there, contact your assigned Nutrition Consultant.
 - 5.1 Only *one* woman may be certified on WIC as a breastfeeding woman. The length of the certification is determined by the age of the infant, and ends when the woman stops breastfeeding the infant or at the infant's first birthday, whichever comes first.
 - 5.2 When two women are involved in the care of an infant on WIC, the non-birth mother must be breastfeeding and meet the eligibility requirements of income, residency, and nutritional risk in order to qualify for WIC.
 - 5.2.1 If the birth mother *is not* breastfeeding, she may still qualify for eligibility as a non-breastfeeding postpartum woman.
 - 5.2.2 If *both* the non-birth mother and the birth mother are breastfeeding, and the birth mother is providing some breast milk for the infant (even if separated from the infant), the birth mother may still be considered for eligibility as a ***non-breastfeeding*** postpartum woman (even though she is technically breastfeeding).
 - 5.2.3 The infant is not required to live with the non-birth breastfeeding woman, but if *both* the breastfeeding woman and the birth mother are certified on WIC, the infant may be claimed in only one woman's household when determining family size and income eligibility.
 - 5.3 Both women will be offered second nutrition education, breastfeeding support, the correct food package for her category, and a referral to a lactation specialist if appropriate.

- 5.4 A non-birth breastfeeding woman must meet specific criteria to qualify for a WIC breast pump. See Appendix B and ♦712—Breastfeeding: Breast Pump Ordering, Distribution and Tracking Guidelines for more details.

Contraindications

- 6.0 Identify contraindications to breastfeeding that may exist for the participant. Keep in mind that these contraindications may occur in only a few participants. See Level 2 Oregon WIC Breastfeeding Training Module for additional details.

- 6.1 Breastfeeding is contraindicated when:

- 6.1.1 The mother has tested positive for HIV (human immunodeficiency virus).
- 6.1.2 The infant has galactosemia (inability to metabolize galactose, a rare condition).
- 6.1.3 The mother has T-cell lymphotropic virus type I or II.
- 6.1.4 The mother has untreated brucellosis.
- 6.1.5 The mother has untreated active tuberculosis. The infant can be fed her expressed milk.
- 6.1.6 The mother has active herpes simplex lesions on her breast. The infant can be fed her expressed milk.

- 6.2 Special consideration, assessment and counseling should be given to a breastfeeding woman in the following situations. Refer the mother to the RD, lactation consultant or her health care provider for further evaluation and follow up.

- 6.2.1 The mother uses cannabis, or certain street drugs such as PCP (phencyclidine) or cocaine. These substances can be detected in human milk and there is concern about the potential impact on the infant.
- 6.2.2 A mother who develops varicella 5 days before through 2 days after delivery will need to be separated from her infant for a period of time. The infant can be fed her expressed milk.
- 6.2.3 A mother with H1N1 influenza should be temporarily isolated from her infant. The infant can be fed her expressed milk.
- 6.2.4 The mother is taking medications from the following classes of drugs. In most cases a compatible medication can be found.
 - Amphetamines
 - Chemotherapy agents
 - Ergotamines
 - Statins

(Contraindications)

- 6.2.5 The mother has been exposed to diagnostic radioactive compounds.
 - 6.2.6 The infant has glucose-6-phosphate-dehydrogenase deficiency.
 - 6.2.7 The infant has phenylketonuria (PKU).
 - Infants with PKU can partially breastfeed while using special supplemental formula.
 - Close monitoring by the health care provider is required.
 - 6.2.8 The mother ingests alcoholic beverages.
 - 6.2.9 The mother smokes cigarettes.
 - 6.2.10 A mother enrolled in a supervised methadone maintenance program can be encouraged to breastfeed.
- 7.0 For the mother and infant who are not fully breastfeeding, refer to ♦730—Bid Formula: Use and Description, to determine the appropriate breast milk substitute for the infant’s use. ★

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Local Agency Breastfeeding Coordinator
ROLES AND RESPONSIBILITIES

DEFINITION:

The Local WIC Agency Breastfeeding Coordinator is a designated staff member who provides leadership to the local WIC agency regarding breastfeeding promotion, education and support.

A Local WIC Agency may assign more than one person to share this role. Specific duties may be delegated to other staff members.

QUALIFICATIONS:

- Has a strong interest in and commitment to supporting breastfeeding
- May be a health care professional, or a paraprofessional who has completed Level 3 breastfeeding training or will complete it soon after assuming this role

DESIRABLE SKILLS:

- Has experience counseling breastfeeding women representative of the WIC population
- Has completed the trainings necessary to be a CPA
- Willingness to pursue the International Board Certified Lactation Consultant (IBCLC) credential if possible

ROLES

- Assesses, plans, implements and evaluates strategies to meet the breastfeeding education needs within the WIC program
- Assists WIC Coordinator and Training Supervisor in the breastfeeding-related training of local agency staff
- Assures that effective, appropriate and accurate breastfeeding information and services are provided to WIC participants
- Authorizes and trains local agency staff in the appropriate assessment and issuance of breast pumps
- Is a breastfeeding advocate and resource within the WIC program, the agency and the community

TYPICAL DUTIES & RESPONSIBILITIES

The Breastfeeding Coordinator provides leadership to the local agency in the following areas:

- Is familiar with Oregon WIC breastfeeding policies and works in coordination with the LA WIC Coordinator to assure compliance
- Advocates within the agency for best practices in breastfeeding promotion, support and management
- Ensures that the local agency follows federal and state laws regarding the provision of rest periods to breastfeeding employees for milk expression

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- Coordinates the breastfeeding activities related to the annual Nutrition Services Plan
- Tracks breastfeeding data through TWIST and other sources, if available
- Oversees breast pump inventory and tracking of multi-user double electric breast pumps
- Plans and coordinates special projects, activities and events, such as support groups, peer counseling, World Breastfeeding Week, and others
- Is the key breastfeeding contact for the State WIC Program

The Breastfeeding Coordinator provides leadership regarding information and services to WIC participants:

- Keeps abreast of breastfeeding research and information as it applies to WIC services and maintains updated reference material
- Assesses task-appropriate breastfeeding training needs of staff
- Provides to staff (through training or other methods) appropriate, current and accurate breastfeeding information, and builds skills of WIC staff, using the online Level 1 Breastfeeding Course as a minimum
- Maintains a positive clinic environment that promotes breastfeeding
- Ensures that participant educational materials are appropriate and effective (brochures, videos, posters, etc.)
- Assures that breastfeeding is promoted to all pregnant women at their initial certification, unless medically contraindicated
- Assures, through review and observation, that WIC staff provide prenatal and postpartum women with participant-centered education in both individual and group settings
- Assures that WIC participants receive breastfeeding encouragement, support, counseling and follow-up, if appropriate
- Assures that breastfed infants' food packages are tailored so as to support continued breastfeeding
- Ensures that WIC participants who need WIC breast pumps receive them in a timely manner and are instructed correctly and provided follow-up
- Assures that WIC participants are referred to other breastfeeding resources that are beyond staff expertise and/or the scope of WIC services

The Breastfeeding Coordinator provides leadership to the local agency and surrounding community:

- Acts as the liaison between the WIC agency and the community regarding breastfeeding promotion, education and support
- Networks with other breastfeeding advocates and professionals and helps to build and strengthen task forces, coalitions or other partnerships and activities
- Identifies breastfeeding resources for the referral and support of WIC participants
- Advocates for breastfeeding services for WIC participants
- Assesses community and agency breastfeeding needs and helps address those needs

Breastfeeding Support – Special Situations

Birth mother and infant are living apart (adoption, foster care)

- A birth mother who is providing breast milk for the infant, even though separated from the infant, may qualify for WIC as a breastfeeding woman if the following criteria are met:
 - The infant is enrolled on WIC
 - The infant’s adopted or foster mother is not on WIC as a breastfeeding woman
 - The birth mother meets the eligibility requirements of income, residency, and nutritional risk
 - The birth mother is not receiving compensation for her breast milk.
- If the birth mother *is not* breastfeeding, she may still qualify for WIC as a non-breastfeeding postpartum woman if the eligibility requirements of income, residency, and nutritional risk are met.

TWIST Documentation	Food Package Assignment
<ul style="list-style-type: none"> • Link birth mother to the breastfeeding infant • Make note in record that mother is living apart from infant 	<ul style="list-style-type: none"> • Assign the WBN food package if the mother is providing some breast milk for the infant • Assign the WN food package if the mother is not breastfeeding

Birth mother and non-birth mother are both breastfeeding the infant and are living apart (adoption, foster care)

- The non-birth mother must be breastfeeding and meet the eligibility requirements of income, residency, and nutritional risk in order to qualify for WIC.
- If *both* the non-birth mother and the birth mother are breastfeeding, and the birth mother is providing some breast milk for the infant (even though separated from the infant), the birth mother may still be considered for eligibility as a ***non-breastfeeding*** postpartum woman. Although she is technically breastfeeding, only *one* woman can be certified on WIC as a breastfeeding woman.
- If *both* the non-birth mother and the birth mother are certified on WIC, the infant may be claimed in only one woman’s household for determining family size and income eligibility.
- The infant is not required to live with the non-birth breastfeeding woman.

TWIST Documentation	Food Package Assignment
Link breastfeeding infant to the woman categorized as the WIC breastfeeding mother	<ul style="list-style-type: none"> • Assign the WE food package to the non-birth breastfeeding woman • Assign the ZN food package to the breastfeeding baby • Assign the WN food package to the non-breastfeeding woman (birth mother)

Birth mother and non-birth mother are both breastfeeding the infant and live in the same household

- The non-birth mother must be breastfeeding and meet the eligibility requirements of income, residency, and nutritional risk.
- Only *one* woman in the household may be certified as a breastfeeding woman.
- Since the non-birth mother cannot be on WIC as a postpartum woman (she was never pregnant), she must be certified as the breastfeeding woman and the birth mother will be certified as the non-breastfeeding postpartum woman (even though she is breastfeeding).
- The length of the certifications will be determined by the age of the infant. As with birth mothers, a non-birth mother’s status as a breastfeeding woman ends when she stops nursing the infant at least one time per day or at the infant’s first birthday, whichever comes first.

TWIST Documentation	Food Package Assignment
<ul style="list-style-type: none"> • Link breastfeeding infant to WIC breastfeeding woman (non-birth mother) • Enroll and certify the two mothers in <i>separate</i> families in TWIST • Enroll infant in the family with the WIC breastfeeding woman • Certification of the non-birth breastfeeding woman: Medical Data Screen Enter 999 for “Total Weight Gain, Pregnancy Just Completed” Health History Questionnaire Enter one for the question “For the pregnancy just completed, how many babies were delivered?” even though she did not give birth • Document the other mother’s ID number in the WIC Notes of each record to link them 	<ul style="list-style-type: none"> • Assign the WE food package to the non-birth breastfeeding woman • Assign the Z food package to the breastfeeding baby • Assign the non-breastfeeding woman (birth mother) the WN food package. <p>See ♦769—Assigning WIC Food Packages for further information</p>

Breast Pump Issuance

- A non-birth breastfeeding woman may qualify for a multi-user double electric breast pump to increase milk production; pump may not be issued until after the baby is born.
- A non-birth breastfeeding woman must be exclusively breastfeeding to be eligible for a personal double electric breast pump, and all of the criteria listed in ♦712—*Breastfeeding: Breast Pump Ordering, Distribution and Tracking Guidelines* for women returning to work or school must be met.
- A woman certified as postpartum (but actually breastfeeding) would be eligible for a manual pump if needed.